PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10/50223

 	. Ellective October 1, 2005											
CLAIMS AS FILED - PA					RT I			ALL E	NTITY		OTHE	R THAN
			(Column 1)		(Column 2)		ı TY	PE [OF	SMALL	
	TOTAL CLAIMS						F	RATE	FEE	7	RATE	FEE
FOR .			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEI	460	OA	BASIC FE	E
TOTAL CHARGEABLE CLAIMS			12 minus 20=		• –		· - >	(S 9=		OR	XS18=	
II—	DEPENDENT (>	(43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT							-	145=	•	OR	-290=	
* If the difference in column 1 is less than zero, enter "0" in column						column 2	<u>L</u>	OTAL	460	OR	TOTAL	
CLAIMS AS AMENDED - PART II									<u> </u>		OTHER	THAN
		(Column 1)		(Colum				IALL	ENTITY	OR		ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE	-]	RATE	ADDI- TIONAL FEE
NON NON	Total	*	Minus			=	X:	9=		OR	X\$18=	
ME	Independent		Minus	***		= .	X	13=·		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							45=		OR	+290=	
•								OTAL		- `	TOTAL	
								FEE.		JOR ,	ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)											,
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBI PREVIOU PAID F	ER JSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		= '	xs	9=		OR	X\$18=	!
AME	Incependent	<u> -</u>	Minus	***		=	X4	3=		OR-	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+14	_			+290=	•
								OTAL	÷.	OR	TOTAL	
								FEE		OR A	DDIT. FEE	
		(Column 1)		(Column		(Column 3)		• •		•		
3 L		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLÝ	PRESENT EXTRA	RA		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	-
	Independent	*	Minus	***		=	X43	=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										UH -		-
• 11	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
11	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20."									OR A	TOTAL DDIT. FEE	
: T	the mignest Num he "Highest Num!	nder Previously Paid ber Previously Paid	For (Total or	5 SPACE is it Independent	is the i	is, enter 3." highest number (lound in th	e sbb tt	priate box	in colu	mn 1.	·
•				•				•				·